

**OPTIONAL STATE SUPPLEMENTATION**

<b>STATUTORY BASIS FOR PAYMENT</b>	Chapter 249, Code of Iowa.
<b>EFFECTIVE DATE</b>	January 1, 1974 (blind), May 1, 1974 (aged and disabled).
<b>ADMINISTRATION</b> <sup>1</sup>	Social Security Administration; State Department of Human Services.
<b>PASSALONG</b>	In compliance by the method of total expenditures.
<b>SCOPE OF COVERAGE</b>	Optional State supplement provided to aged, blind, and disabled persons living in the arrangements listed under "Payment Levels." Supplementation is not provided to residents of emergency shelters or medical facilities. Blind children are eligible for optional supplementary payments if living in their own household or with a dependent relative; disabled children are eligible for optional supplementation if living with a dependent relative.
<b>RECOVERIES, LIENS, AND ASSIGNMENTS</b>	None.
<b>RELATIVE RESPONSIBILITY</b>	None.
<b>INCOME DISREGARDS</b>	No disregards in addition to the Federal income disregards.
<b>RESOURCE LIMITATIONS</b>	Federal SSI resource limitations apply.
<b>PLACE OF APPLICATION</b>	Social Security Administration field offices for federally administered payments; local offices of State Department of Human Services for State-administered payments.
<b>FUNDING</b>	Assistance: State funds. Administration: State funds.

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<sup>1</sup> State Department of Human Services administers supplemental payments for persons receiving residential or in-home health-related care. Social Security Administration administers all other supplemental payments, including mandatory minimum supplementation.

**INTERIM  
ASSISTANCE**

State participates.

**PAYMENT LEVELS <sup>2</sup>**

<u>Code</u>	<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
		<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
A	Living independently: Blind	\$522.00	<sup>3</sup> \$795.00	\$22.00	<sup>3</sup> \$44.00
B	Living in household of another: Blind	355.34	<sup>3</sup> 544.67	22.00	<sup>3</sup> 44.00
C	Living with dependent person: Aged and disabled	751.00	1,002.00	251.00	251.00
	Blind	773.00	<sup>3</sup> 1,046.00	273.00	<sup>3</sup> 295.00
D	Family Life	562.20	1,164.40	62.20	413.40
H	Living with dependent person in household of another: Aged and disabled	584.34	751.67	251.00	251.00
	Blind	606.34	795.67	273.00	295.00
I.	Family life or boarding home (one-third reduction in Federal benefit rate applies)	395.54	894.16	62.20	393.49
	Residential care	809.73	N/A	<sup>4</sup> 309.73	N/A
	In-home health care	958.20	<sup>5</sup> 1,667.32	<sup>6</sup> 458.20	<sup>5</sup> 916.32

<sup>2</sup> Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.<sup>3</sup> Payment level when both members of couple are blind; when one member blind, payment is reduced by \$22.<sup>4</sup> Represents maximum amount paid. Amount of State supplement is based on allowable costs of residential care (\$17.05 to \$23.83 per day) plus a personal needs allowance of \$71 per month minus the Federal SSI payment. Payment is State-administered.<sup>5</sup> Payment based on both members of a couple needing in-home health related care. When only one member needs care, payment is reduced by \$458.20. Supplement is State-administered.<sup>6</sup> Payment based on actual cost of in-home health-related care up to a maximum of \$458.20 plus basic Federal benefit. Payment is State-administered.

**STATE ASSISTANCE FOR SPECIAL NEEDS**

State does not provide assistance for special needs.

**MEDICAID****ELIGIBILITY:**

**CRITERION** SSI program guidelines (title XVI).

**DETERMINED BY** Social Security Administration.

**MEDICALLY NEEDY PROGRAM** Program for the aged, blind, and disabled medically needy.

**UNPAID MEDICAL EXPENSES** The Social Security Administration obtains this information.